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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee.	First name Yvette Middle name Foy Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-0113	

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Case number (if known)

Debtor 1 Joyce Yvette Foy

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1830 Rowell Avenue Joliet, IL 60433 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Will County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district.

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 **Joyce Yvette Foy**

Par	t 2: Tell the Court About	Your E	Bankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by 1</i> page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankrup box.	otcy
	choosing to file under	Chapter 7					
			Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee	•	about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee you	with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or relf, your attorney may pay with a credit card or check.	noney
						n, sign and attach the Application for Individuals to	Pay
			I request that but is not req	ut my fee be wa uired to, waive y	our fee, and may do so only if you	only if you are filing for Chapter 7. By law, a judge ir income is less than 150% of the official poverty li	ne that
						installments). If you choose this option, you must f al Form 103B) and file it with your petition.	ill out
).	Have you filed for bankruptcy within the	■ N	0.				
	last 8 years?	☐ Y	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ N	0				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	ПΝ	o. Go to I	ine 12.			
	residence:	Y	es. Has yo	our landlord obta	ined an eviction judgment against	you and do you want to stay in your residence?	
			•	No. Go to line	12.		
				Yes. Fill out Indibankruptcy pet		udgment Against You (Form 101A) and file it with t	his

Document Page 4 of 53 Case number (if known) Debtor 1 Joyce Yvette Foy Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure **Bankruptcy Code and are** you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Joyce Yvette Foy

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Joyce Yvette Foy Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joyce Yvette Foy Signature of Debtor 2 Joyce Yvette Foy Signature of Debtor 1 Executed on August 24, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Joyce Yvette Foy Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christina Banyon	Date	August 24, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Christina Banyon		
Printed name		
Banyon & Scheinbaum, LLC Firm name		
3077 West Jefferson Street		
Suite 107		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	cbanyon.law@gmail.com
6283282		
Par number & State		

		Docume	ent Page 8 of 5	<u>.3 </u>	
Fill in this informa	ation to identify your	case:			
Debtor 1	Joyce Yvette Foy	,			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,150.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	21,150.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	11,528.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	11,304.00
	Your total liabilities	\$	22,832.00
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,781.26
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,747.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 9 of 53 Case number (if known) Debtor 1 **Joyce Yvette Foy**

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 2,327.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Document Page 10 of 53 Fill in this information to identify your case and this filing: Debtor 1 **Joyce Yvette Foy** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Subaru Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Legacy Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2005 Debtor 2 only Current value of the Current value of the 80.000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$9,000.00 \$9,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$9,000.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

		Filed 08/24/17 Document	Entered 08/24/17 18:56:40 Page 11 of 53_	Desc Main
Debtor	Joyce Yvette Foy		Case number (if known)	
■ Y	es. Describe			
	Misc. Household G	oods and Furniture	e of Debtor	\$1,000.00
	etronics amples: Televisions and radios; audio, video, s including cell phones, cameras, media		oment; computers, printers, scanners; music c	ollections; electronic devices
■ N	• •	, , , ,		
Exa	ectibles of value amples: Antiques and figurines; paintings, print other collections, memorabilia, collecti No Yes. Describe		oks, pictures, or other art objects; stamp, coin,	or baseball card collections;
Exa	ipment for sports and hobbies amples: Sports, photographic, exercise, and other musical instruments No Yes. Describe	her hobby equipment; I	picycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
I N	xamples: Pistols, rifles, shotguns, ammunition,	and related equipment		
I N	xamples: Everyday clothes, furs, leather coats,	designer wear, shoes,	accessories	
	kamples: Everyday jewelry, costume jewelry, e	ngagement rings, wedd	ding rings, heirloom jewelry, watches, gems, g	old, silver
Ex ■ N	n-farm animals kamples: Dogs, cats, birds, horses No Yes. Describe			
I	y other personal and household items you No Yes. Give specific information	did not already list, ir	ncluding any health aids you did not list	
	dd the dollar value of all of your entries froor Part 3. Write that number here			\$1,000.00
Part 4:	Describe Your Financial Assets			
Do yo	u own or have any legal or equitable interes	st in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Ca : <i>Ex</i> :	kamples: Money you have in your wallet, in you	ur home, in a safe depo	osit box, and on hand when you file your petition	on

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 **Joyce Yvette Foy** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Chase Checking** \$90.00 17 1 **New Century Credit Union** \$40.00 17.2. **Pre Paid Card** \$20.00 17.3 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: \$11,000.00 401 (k) Fidelity 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

Official Form 106A/B Schedule A/B: Property page 3

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☐ Yes. Give specific information about them...

No

De	ebtor 1	Joyce Yvette Foy	Document	Page 1	L3 01 53 _{Ca}	ase number (if known)	
26.	Examµ ■ No	s, copyrights, trademarks	, trade secrets, and other intellectus, websites, proceeds from royalties a			S	
27.	Licens Examp ■ No	es, franchises, and other	general intangibles sive licenses, cooperative associatio	n holdings,	liquor license	es, professional licenses	S
M	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	funds owed to you Give specific information at	out them, including whether you alre	eady filed th	e returns and	I the tax years	
29.	Examp ■ No	support bles: Past due or lump sum Give specific information	alimony, spousal support, child support.	ort, mainter	nance, divorce	e settlement, property s	ettlement
	Exam _p ■ No		ou ty insurance payments, disability ben you made to someone else	efits, sick p	ay, vacation	pay, workers' compens	sation, Social Security
31.		sts in insurance policies bles: Health, disability, or life	e insurance; health savings account (HSA); cred	it, homeowne	er's, or renter's insuranc	ee
	■ Yes.	-	ny of each policy and list its value. pany name:		Beneficiary	:	Surrender or refund value:
			Insurance - NuCentury - Term Nalue	No			Unknown
32.	If you a some of		ue you from someone who has die g trust, expect proceeds from a life in		licy, or are cu	urrently entitled to receiv	ve property because
	Examp ■ No		ether or not you have filed a lawsu t disputes, insurance claims, or rights		a demand fo	or payment	
34.	■ No	contingent and unliquidat	ed claims of every nature, includin	g counterd	claims of the	debtor and rights to s	set off claims
35.	■ No	nancial assets you did not Give specific information	already list				

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	Joyce Yvette Foy	Case number (if known)	
	d the dollar value of all of your entries from Part 4, include Part 4. Write that number here		\$11,150.00
Part 5:	Describe Any Business-Related Property You Own or Have an In	terest In. List any real estate in Part 1.	
37. Do yo	u own or have any legal or equitable interest in any business-rel	ated property?	
No.	Go to Part 6.		
☐ Yes.	Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.	
46. Do y	ou own or have any legal or equitable interest in any farr	n- or commercial fishing-related property?	
■ N	o. Go to Part 7.		
ΠY	es. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That Y		
	ou have other property of any kind you did not already li mples: Season tickets, country club membership	st?	
☐ Ye	s. Give specific information		
54. Ad	the dollar value of all of your entries from Part 7. Write	that number here	\$0.00
Part 8:	List the Totals of Each Part of this Form		
55. Par	t 1: Total real estate, line 2		\$0.00
56. Par	t 2: Total vehicles, line 5	\$9,000.00	
57. Par	t 3: Total personal and household items, line 15	\$1,000.00	
58. Par	t 4: Total financial assets, line 36	\$11,150.00	
59. Par	t 5: Total business-related property, line 45	\$0.00	
60. Par	t 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Par	t 7: Total other property not listed, line 54	+ \$0.00	

\$21,150.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$21,150.00

\$21,150.00

			111 1 1000 13 01 33	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Joyce Yvette Foy	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	Property	You	Claim	as	Exempt
---------	----------	-------	-----------------	-----	-------	----	--------

 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with 	. W	Vhich set of exem	ptions are vou claimi	ıa?	Check one only	. even if	vour spouse	is filina	with v	oυ.
--	-----	-------------------	-----------------------	-----	----------------	-----------	-------------	-----------	--------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
2005 Subaru Legacy 80,000 miles Line from Schedule A/B: 3.1	\$9,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Holli Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. Household Goods and Furniture of Debtor	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Chase Checking Line from Schedule A/B: 17.1	\$90.00		\$90.00	735 ILCS 5/12-1001(b)
Ellie II olii ochedale 24B. 17.1			100% of fair market value, up to any applicable statutory limit	
New Century Credit Union Line from Schedule A/B: 17.2	\$40.00		\$40.00	735 ILCS 5/12-1001(b)
Elito II olii Soriodalo PAD. 1112			100% of fair market value, up to any applicable statutory limit	
Pre Paid Card Line from Schedule A/B: 17.3	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
LINE HOLL SCHEUUIE PAD. 11.0			100% of fair market value, up to any applicable statutory limit	

Document Page 16 of 53 Joyce Yvette Foy Case number (if known) Brief description of the property and line on *Schedule A/B* that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B 401 (k) Fidelity 735 ILCS 5/12-1006 \$11,000.00 \$11,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Life Insurance - NuCentury - Term No 215 ILCS 5/238 \$0.00 Unknown cash Value Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Entered 08/24/17 18:56:40

Desc Main

3.	Are you claiming a	homestead exemption	of more than \$160,375	5
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Doc 1

Case 17-25402

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 08/24/17

- No
- Yes

	Case	17-25402	Doc 1 Filed 08/24/17 Document	Entere Page 1	ed 08/24/17 18:56:4 7 of 53	40 Desc M	lain
Fill ir	this information	on to identify you		1 121717 -			
Debto	or 1	loyce Yvette Fo	y				
		irst Name	Middle Name	Last Name			
Debto (Spous		irst Name	Middle Name	Last Name			
Unite	d States Bankru	ptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case (if know	number					_	if this is an led filing
	cial Form 1		Who Hove Claims	Socies	d by Proporty	anione	Ü
SCI	iedule D:	Creditors	Who Have Claims	Secure:	d by Property		12/15
s need numbe	ded, copy the Add er (if known).	litional Page, fill it o	f two married people are filing togeth out, number the entries, and attach it				
. Do a	any creditors have	e claims secured by	your property?				
	No. Check this	box and submit the	nis form to the court with your other	schedules. Y	ou have nothing else to rep	ort on this form.	
	Yes. Fill in all	of the information b	pelow.				
Part '	1: List All Se	cured Claims					
for ea	ch claim. If more t	han one creditor has	nore than one secured claim, list the cre a particular claim, list the other creditors cal order according to the creditor's nam	s in Part 2. As	Amount of claim Val	umn B ue of collateral t supports this im	Column C Unsecured portion If any
2.1	Car Max Auto	Finance	Describe the property that secures t	the claim:	\$11,528.00	\$9,000.00	\$2,528.00
	Creditor's Name		2005 Subaru Legacy 80,000	miles			
	PO Box 3174 Milwaukee, W	/I 53201	As of the date you file, the claim is: apply. Contingent	Check all that			
-	Number, Street, City,	State & Zip Code	☐ Unliquidated ☐ Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ An agreement you made (such as mortgage or secured car loan)					cured		
□ De	ebtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
_		ebtors and another	☐ Judgment lien from a lawsuit				
	neck if this claim ommunity debt	relates to a	Other (including a right to offset)				

\$11,528.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$11,528.00 Write that number here:

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

0466

Date debt was incurred

		Document	Page 18 of 53	
Fill in this	s information to identify your	case:		
Debtor 1	Joyce Yvette Foy	1		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case num (if known)	nber		-	Check if this is an amended filing
Sched		/ho Have Unsecured		12/15
any execute Schedule G Schedule D left. Attach	ory contracts or unexpired leases E Executory Contracts and Unexp E Creditors Who Have Claims Sec	s that could result in a claim. Also I pired Leases (Official Form 106G). I cured by Property. If more space is	FY claims and Part 2 for creditors with NONPRIORITY cla list executory contracts on Schedule A/B: Property (Offic Do not include any creditors with partially secured claims needed, copy the Part you need, fill it out, number the er port in a Part, do not file that Part. On the top of any add	cial Form 106A/B) and on s that are listed in ntries in the boxes on the
Part 1:	List All of Your PRIORITY Ur	nsecured Claims		
	y creditors have priority unsecure	ed claims against you?		
	. Go to Part 2.			
☐ Yes	S.			
Part 2:	List All of Your NONPRIORIT	TY Unsecured Claims		
3. Do any	y creditors have nonpriority unse	cured claims against you?		
☐ No.	. You have nothing to report in this p	part. Submit this form to the court with	your other schedules.	
■ Yes	S.			
4. List al unsecu	I of your nonpriority unsecured clured claim, list the creditor separatel ne creditor holds a particular claim,	ly for each claim. For each claim listed	ne creditor who holds each claim. If a creditor has more that, identify what type of claim it is. Do not list claims already in have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
				Total claim
4.1 A	ssociate Pathologists	Last 4 digits of acc	count number	\$58.00
3	onpriority Creditor's Name 9784 Treasury Center	When was the deb	t incurred?	_
N	hicago, IL 60694 umber Street City State Zlp Code lino incurred the debt? Check one.	•	file, the claim is: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
_	Debtor I and Debtor 2 only At least one of the debtors and an	T (NONDRIGE	RITY unsecured claim:	
	I At least one or the debtors and an Check if this claim is for a com			
de	the claim subject to offset?	illuliity	ng out of a separation agreement or divorce that you did not ims	
	No	<u>-</u> ' ' '	n or profit-sharing plans, and other similar debts	
] _{Yes}	Other. Specify	Medical Debt	
		2		_

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Debtor 1 Joyce Yvette Foy Case number (if know) 4.2 Blatt, Hasenmiller, Leibsker & Moore Last 4 digits of account number 3139 \$993.00 Nonpriority Creditor's Name 10 South LaSalle - Suite 2200 When was the debt incurred? Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Collection Midland Funding ☐ Yes 4.3 Capital One Last 4 digits of account number \$450.00 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit card purchases** 4.4 Care Credit /Synchrony Bank Last 4 digits of account number \$691.00 Nonpriority Creditor's Name PO Box 960061 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

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Case number (if know) Debtor 1 Joyce Yvette Foy 4.5 Charles Miller Last 4 digits of account number \$388.00 Nonpriority Creditor's Name 23862 Network Place When was the debt incurred? Chicago, IL 60673 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes 4.6 \$538.00 Com Ed Last 4 digits of account number Nonpriority Creditor's Name PO Box 9037 When was the debt incurred? Addison, TX 75001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Utility Other. Specify 4.7 Comcast Last 4 digits of account number \$419.00 Nonpriority Creditor's Name PO Box 3002 When was the debt incurred? Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility

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Case number (if know)

Convergent Outsourcing	Last 4 digits of account number	\$2,328.00
Nonpriority Creditor's Name 800 SW 39th Street PO Box 9004	When was the debt incurred?	
Renton, WA 98057 Number Street City State Zlp Code	As of the date you file the claim is Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection	
Credit One Bank	Last 4 digits of account number	\$561.00
Nonpriority Creditor's Name PO Box 60500	When was the debt incurred?	
City of Industry, CA 91716	As of the date were file, the plates in Obselve II that souls	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
Credit One Bank	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name		
PO Box 98873	When was the debt incurred?	
Las Vegas, NV 89193 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other, Specify Credit card purchases	

-25402 Doc 1 Foy	Filed 08/24/17 Entered 08/24/17 18:56:40 Desc M Document Page 22 of 53 Case number (if know)	ain
al Group	Last 4 digits of account number	\$35.00
s Name ons Center Drive 693	When was the debt incurred?	
State Zlp Code lebt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Contingent	
	☐ Unliquidated	
btor 2 only	☐ Disputed	
•	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
t to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ Other Specify Medical Debt	
		*440.00
	Last 4 digits of account number	\$443.00
	When was the debt incurred?	
State ZIp Code	As of the date you file, the claim is: Check all that apply	
lebt? Check one.		
	☐ Contingent	
	☐ Unliquidated	
btor 2 only	☐ Disputed	
e debtors and another	Type of NONPRIORITY unsecured claim:	
nim is for a community	☐ Student loans	
t to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	\square Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify Medical	
Ventures		\$262.00
	Last 4 digits of account number	Ψ202.00
Place	When was the debt incurred?	
State ZIp Code	As of the date you file, the claim is: Check all that apply	
lebt? Check one.		
	☐ Contingent	
	☐ Unliquidated	
btor 2 only	☐ Disputed	
	exal Group so Name ons Center Drive 693 State Zlp Code lebt? Check one. btor 2 only the debtors and another thim is for a community to offset? Anes so Name IL 60132 State Zlp Code lebt? Check one. btor 2 only the debtors and another thim is for a community to offset? Ventures so Name Place 673 State Zlp Code lebt? Check one.	Document Page 22 of 53 Case number (# know)

☐ Yes

debt

■ No

Type of NONPRIORITY unsecured claim:

■ Other. Specify Medical Debt

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

lacksquare At least one of the debtors and another

Is the claim subject to offset?

 $\hfill \Box$ Check if this claim is for a community

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Edward Hospital	Last 4 digits of account number	\$392.0
Nonpriority Creditor's Name PO Box 4207 Carol Stream, IL 60197	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Debt	
First Premier Bank	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name		
3820 N. Louise Ave Sioux Falls, SD 57117	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases	
First Premier Bank	Last 4 digits of account number	\$445.0
Nonpriority Creditor's Name		•
PO Box 5529	When was the debt incurred?	
Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	. a. a. aate you me, the orann is. Oneck all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Heartland Bank Visa	Last 4 digits of account number	
Nonpriority Creditor's Name	Last 4 digits of account number	
301 Madison Street, Suite 275 Joliet, IL 60435	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Credit card purchases	
Joliet Radiological	Last 4 digits of account number	\$
Nonpriority Creditor's Name		
36910 Treaury Center Chicago, IL 60694	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical Debt	
Merchants Credit Guide	Last 4 digits of account number	\$:
Nonpriority Creditor's Name		•
223 West Jackson Suite 900	When was the debt incurred?	
Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Medical Debt

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Case number (if know)

Debio	Joyce rveile roy	Case number (ii know)	
4.2	Merrick Bank	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name PO Box 660175	When was the debt incurred?	
	Dallas, TX 75266	When was the dest incurred:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.2	Midwest Descriptory		£40.00
1	Midwest Respiratory Nonpriority Creditor's Name	Last 4 digits of account number	\$49.00
	10660 West 143rd, Suite B Orland Park, IL 60462	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Debt	
4.2	Nationalida Onedit O Callegian		*144.00
2	Nationwide Credit & Collection Nonpriority Creditor's Name	Last 4 digits of account number	\$114.00
	PO Box 3219	When was the debt incurred?	
	Hinsdale, IL 60522		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	

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Jebi	Joyce Yvette Foy	Case number (if know)	
4.2 3	Nicor Gas	Last 4 digits of account number	\$912.00
	Nonpriority Creditor's Name PO Box 5407	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility	
1.2	Physicians Immediate Care	Local Admits of consumt mumber	\$153.00
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ100.00
	PO Box 8799	When was the debt incurred?	
	Carol Stream, IL 60197		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Debt	
4.2 5	Physicians Immediate Care	Last 4 digits of account number	\$153.00
	Nonpriority Creditor's Name PO Box 8799	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Debt	

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Case number (if know)

Debtor 1	Joyce Yvette Foy		Case n	umber (if kn	.ow)	
4.2	Presence Saint Joseph Medical					
_	Cente	Last 4 digits of account number	er			\$742.00
;	Nonpriority Creditor's Name 32814 Collection Center Drive Chicago, IL 60693	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the cla	im is: Check	all that apply	у	
,	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a s	separation ag	reement or d	livorce that you did not	
	s the claim subject to offset?	report as priority claims			9 114	
	No	☐ Debts to pension or profit-sh	•	and other sin	niiar debts	
	Yes	Other. Specify Medical	Debt			
4.2	Stellar Recovery	Last 4 digits of account numb	or			\$249.00
, ,	Nonpriority Creditor's Name	Last 4 digits of account numb				Ψ2-10.00
	PO Box 1119	When was the debt incurred?				
	Charlotte, NC 28201 Number Street City State Zlp Code	As of the date you file, the cla	i m is: Chack	all that anni	V	
	Who incurred the debt? Check one.	, to or the date you me, the old	io. oncon	all that appl	y	
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	□ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a s	separation ag	reement or d	livorce that you did not	
	s the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sh		and other sin	nilar debts	
	Yes	Other. Specify Collection	on			
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed				
5. Use this	s page only if you have others to be notified	about your bankruptcy, for a debt th	at you alrea	dy listed in	Parts 1 or 2. For example,	if a collection agency
have m	g to collect from you for a debt you owe to some than one creditor for any of the debts the for any debts in Parts 1 or 2, do not fill out	nat you listed in Parts 1 or 2, list the a				
	d Address	On which entry in Part 1 or Part 2 did	you list the o	riginal credito	or?	
Com E		Line 4.27 of (<i>Check one</i>):			h Priority Unsecured Claims	
_	Stream, IL 60197		Part 2: 0	Creditors with	h Nonpriority Unsecured Clai	ims
		Last 4 digits of account number				
	d Address	On which entry in Part 1 or Part 2 did	you list the o	riginal credito	or?	
	d Credit Management orthside Drive - Suite 300	Line 4.2 of (Check one):	_		h Priority Unsecured Claims	
	ego, CA 92108		Part 2: 0	Creditors with	h Nonpriority Unsecured Clai	ims
		Last 4 digits of account number				
Part 4:	Add the Amounts for Each Type of U	Jnsecured Claim				
	ne amounts of certain types of unsecured cl unsecured claim.		al reporting	purposes o	nly. 28 U.S.C. §159. Add th	e amounts for each
					Total Claim	
	6a. Domestic support obligatio	ns	6a.	\$	0.00	
	otal ims					
from Pa		ots you owe the government	6b.	\$	0.00	
	6c. Claims for death or persona	al injury while you were intoxicated	6c.	\$	0.00	

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Case number (if know)

Debtor 1 Jo	yce Yv	ette Foy	Case number (if know)				
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00		
				Total Claim			
	6f.	Student loans	6f.	\$	0.00		
Total claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00		
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00		
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 11,	304.00		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$11,	304.00		

Fill in this infor	rmation to identify your	case:		
Debtor 1	Joyce Yvette Foy	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 30 d	of 53
Fill in this	information to identify your o	ase:		
Debtor 1	Joyce Yvette Foy			
	First Name	Middle Name	Last Name	
Debtor 2	ng) First Name	Middle Name	Loot Name	
(Spouse if, fili	ng) First Name	widdle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
		. 1. 4		
Sched	lule H: Your Code	ebtors		12/15
	e and case number (if known). you have any codebtors? (If y			e as a codebtor.
■ No □ Yes	S			
Arizon	hin the last 8 years, have you ha, California, Idaho, Louisiana, Go to line 3. s. Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form out C	e 2 again as a codebtor only if 106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor	that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	r if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Official)6G). Use Schedule D, Schedule E/F, or Schedule G to file Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and ZIF	Code		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	

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Fill	in this information to identify your c	ase:				ı				
	otor 1 Joyce Yvett									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
(If kr	se number		-			□ A		ed filing ent showin	g postpetition ollowing date:	
	fficial Form 106l					M	IM / DD/ Y	YYYY		
	chedule I: Your Inc									12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment Fill in your employment	ır spouse is not filing w	ith you, do not inclu onal pages, write yo	ide infor	nati	on about	your spour your spour your	ouse. If mo known). A	ore space is answer every	needed,
	information.		Debtor 1				□ Emple		ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				□ Not e	•		
	employers.	Occupation	Bright Start							
	Include part-time, seasonal, or self-employed work.	Employer's name	64 Orland Squa	re, Suit	e 20	08 C				
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your noi	n-filing
If yo	u or your non-filing spouse have me e space, attach a separate sheet to	ore than one employer, co	ombine the informatio	n for all e	empl	oyers for	that perso	on on the li	nes below. If y	you need
						For Dek	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,	,328.34	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	2,32	28.34	\$	N/A	

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Debt	or 1	Joyce Yvette Foy	-	C	ase nu	ımber (<i>if kr</i>	nown)				
					For D	ebtor 1			Debtor		
	Con	y line 4 here	4.		\$	2 220	2.4	nor \$	n-filing s	•	
	Cop	y line 4 nere	4.		Ψ	2,328	0.34	Ψ_		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	547	7.08	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	٠.	\$	(0.00	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c	:.	\$	(0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$_		N/A	_
	5e.	Insurance	5e		\$		0.00	\$_		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		\$		0.00	\$_ \$		N/A N/A	_
	5h.	Other deductions. Specify:	5h		\$			+ \$-		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.		\$ \$		7.08	\$		N/A	=
					:			Ψ_ \$			_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,781	.26	Φ_		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						•			
	O.L.	monthly net income.	8a		\$		0.00	\$_		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b	٠.	\$		0.00	\$_		N/A	_
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	·.	\$	(0.00	\$_		N/A	
	8d.	Unemployment compensation	8d	l.	\$	(0.00	\$		N/A	_
	8e.	Social Security	8e	٠.	\$		0.00	\$_		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$_		N/A	_
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g 8h		\$		0.00	*_ + \$		N/A N/A	_
	OII.		_ '''	···	Ψ		.00	` <u> </u>		IVA	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		(0.00	\$_		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	1.	781.26	+ \$		N/A	= \$	1,781.26
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					•		e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	1,781.26
13.	Do y	you expect an increase or decrease within the year after you file this form	?							month	ly income
	=	No. Yes Explain:									

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Fill in	this informa	tion to identify yo	our case:					
Debto		Joyce Yvette				Che	eck if this is:	
Debto	r 2						An amended filing A supplement show	wing postpetition chapter
(Spou	se, if filing)					_	13 expenses as of	the following date:
United	d States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case (If kno	number							
Off	icial Fo	rm 106J						
Sc	hedule	J: Your	Exper	ises				12/1
Be as	s complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Part 1	1: Descr	ibe Your House	hold					
	No. Go to							
			in a separ	ate household?				
	ПΝ	0	•					
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
(dependents	names.						□ Yes □ No
								☐ No
								□ No
								☐ Yes
								□ No
3.	Do vour exr	enses include	_					☐ Yes
	expenses o	f people other t	han $_{m \Box}$	No Yes				
	yourself and	d your depende	nts? —	100				
Part 2		ate Your Ongoi		y Expenses uptcy filing date unless y	you are using this f	orm 00 0 0	unnlament in a Ch	ontor 12 ages to report
expe	nses as of a cable date.	date after the	bankruptc	y is filed. If this is a supp	ou are using this rolemental <i>Schedule</i>	e <i>J</i> , check t	the box at the top o	of the form and fill in the
the v		n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
(Onic	Jiai Folili 10	oi. <i>)</i>					Tour oxp	
		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	0.00
ı	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	0.00
			•	ipkeep expenses		4c. 4d.		20.00
		owner's associat nortgage paym		dominium dues Dur residence, such as ho	me equity loans	4a. 5.	·	0.00 0.00

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6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 5a. 5b. 5c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	180.00 90.00 140.00 0.00 550.00 100.00 80.00 20.00 150.00 20.00
6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 5a. 5b. 5c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	90.00 140.00 0.00 550.00 0.00 100.00 80.00 20.00 150.00
6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 5a. 5b. 5c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	90.00 140.00 0.00 550.00 0.00 100.00 80.00 20.00 150.00
6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 5a. 5b. 5c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	140.00 0.00 550.00 0.00 100.00 80.00 20.00 150.00
6d. 7. 8. 9. 10. 11. 12. 13. 14. 5a. 5b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 550.00 0.00 100.00 80.00 20.00 150.00
7. 8. 9. 10. 11. 12. 13. 14. 5a. 5b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	550.00 0.00 100.00 80.00 20.00 150.00
8. 9. 10. 11. 12. 13. 14. 5a. 5b.	\$ = = = = = = = = = = = = = = = = = = =	0.00 100.00 80.00 20.00 150.00 20.00
9. 10. 11. 12. 13. 14. 5a. 5b.	\$ = \$ = \$ = \$ =	100.00 80.00 20.00 150.00 20.00
10. 11. 12. 13. 14. 5a. 5b. 5c.	\$	80.00 20.00 150.00 20.00
11. 12. 13. 14. 5a. 5b. 5c.	\$ \$ \$ \$	20.00 150.00 20.00
12. 13. 14. 5a. 5b.	\$ \$ \$ \$	150.00 20.00
13. 14. 5a. 5b. 5c.	\$ \$ 	20.00
13. 14. 5a. 5b. 5c.	\$ \$ 	20.00
14. 5a. 5b. 5c.	\$	
5a. 5b. 5c.		0.00
5b. 5c.	\$	
5b. 5c.	\$	
5b. 5c.	5	
5c.		0.00
	·	0.00
5d :	\$	91.00
ou.	\$	0.00
16.	\$	0.00
70	¢	200.00
		306.00
		0.00
	•	0.00
7d.	\$	0.00
18	\$	0.00
		0.00
	Ψ	0.00
-	ır Incomo	
		0.00
		0.00
		0.00
	·	0.00
0e.	\$	0.00
21.	+\$	0.00
	\$	1,747.00
		1,747.00
	·	4 = 1= 00
	\$	1,747.00
3a.	\$	1,781.26
3b.	-\$	1,747.00
	<u> </u>	.,00
	•	04.00
23c.	\$	34.26
41.7 = 3	fa	
		or decrease because o
age po	ayındık tü intiledət	on decidase because (
1 17777 1 11:00:00 20:00	5d. 7a. 7b. 7c. 7d. 18. 19. 20d. 0d. 0e. 21. (line) 3a. 8bb. (line) 8bb. 8c. (line)	5d. \$ 16. \$ 7a. \$ 7b. \$ 7c. \$ 7d. \$ 18. \$ 19. \$ 19. \$ 2 Your Income. 20a. \$ 20b. \$ 20c. \$ 20d. \$ 21. +\$ \$ 3a. \$ 3b\$

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Fill in thi	is information to identify your	case:			
Debtor 1	Joyce Yvette Foy	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
(Opouse II, I	ming) That Name				
United St	tates Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case nur	mber				
(if known)					Check if this is an
					amended filing
O.(I E 400D				
	I Form 106Dec				
Decl	aration About a	an Individua	ıl Debtor's Sc	hedules	12/15
lf two ma	rried people are filing togethe	r, both are equally resp	onsible for supplying cor	rect information.	
You must	t file this form whenever you fi	ile bankruptcy schedul	es or amended schedules	. Making a false statement, co	ncealing property, or
	money or property by fraud in		nkruptcy case can result i	n fines up to \$250,000, or imp	risonment for up to 20
years, or	both. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
	_				
	Sign Below				
Did	you pay or agree to pay some	one who is NOT an atte	orney to help you fill out b	pankruptcy forms?	
	No				
	Yes. Name of person			Attach Bankruptcy Pe	tition Preparer's Notice,
	·			Declaration, and Sign	ature (Official Form 119)
Unde	er penalty of perjury, I declare	that I have read the su	mmary and schedules file	d with this declaration and	
that	they are true and correct.		•		
x	/s/ Joyce Yvette Foy		X		
_	Joyce Yvette Foy		Signature of	Debtor 2	
	Signature of Debtor 1		3		
	Data A		5 .		
	Date August 24, 2017		Date		

Fill	in this inform	nation to identify you	r case:			
	tor 1	Joyce Yvette Fo				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
(if kno	e number				_	Check if this is an mended filing
∩ff	ficial For	rm 107				
			Affairs for Individ	luals Filing for B	ankruptcy	4/16
infor	mation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you	
			arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not married	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Scl	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part	Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,636.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Joyce Yvette Foy

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Case number (if known)

				Debtor 1		Debtor 2	
		Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions)		Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
	r last calen anuary 1 to	idar year: December 31	, 2016)	■ Wages, commissions, bonuses, tips	\$18,181.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
5.	Include include and other winnings. List each s	come regardle: public benefit If you are filing	ss of wheth payments; g a joint cas gross inco	pensions; rental income; inte e and you have income that	amples of <i>other income</i> are al	•	ecurity, unemployment, d gambling and lottery
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: List	t Certain Payn	nents You	Made Before You Filed for	Bankruptcy		
5.	Are either ☐ No.	Neither Debindividual print During the 90 No. Co	tor 1 nor D marily for a O days befo Go to line 7 List below e paid that cre not include	personal, family, or househo re you filed for bankruptcy, d each creditor to whom you pa editor. Do not include paymen payments to an attorney for t	umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in the for domestic support obligations bankruptcy case.	of \$6,425* or more? on one or more payments and tations, such as child support a	he total amount you and alimony. Also, do
	■ Yes.			r both have primarily consure you filed for bankruptcy, d	umer debts. d you pay any creditor a total	of \$600 or more?	
		■ Yes L	nclude pay	each creditor to whom you pa		the total amount you paid tha ort and alimony. Also, do not	

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Car Max Auto Finance PO Box 3174 Milwaukee, WI 53201	June, July, August Car Payment	\$915.00	\$0.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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Debtor 1	Joyce Yvette Foy	Document	Cas	se number (if known)		
<i>Insid</i> of wh	in 1 year before you filed for bankru lers include your relatives; any genera nich you are an officer, director, persor siness you operate as a sole proprieto ony.	I partners; relatives of any gen in control, or owner of 20%	eneral partners; partners or more of their votin	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporations ent, including one fo
_	No					
⊔ Insi	Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for t	his payment
insic	in 1 year before you filed for bankruler? de payments on debts guaranteed or		paid ayments or transfer a		ccount of a de	bt that benefited an
_	No Yes. List all payments to an insider					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment or's name
Part 4:	Identify Legal Actions, Repossess	sions and Foreclosures	•			
Cas	No Yes. Fill in the details. e title e number	Nature of the case	Court or agency		Status of the	case
Mid	lland Fundding v. Foy SC 3139	Collection			■ Pending □ On appea □ Conclude	
	in 1 year before you filed for bankruck all that apply and fill in the details be		perty repossessed, f	foreclosed, garnis	shed, attached,	seized, or levied?
_	No. Go to line 11. Yes. Fill in the information below.					
	ditor Name and Address	Describe the Property		Date		Value of the property
acco	in 90 days before you filed for bank ounts or refuse to make a payment b No Yes. Fill in the details.		cluding a bank or fi	nancial institutior	n, set off any ar	nounts from your
_	ditor Name and Address	Describe the action the	ne creditor took	Date taker	action was	Amount
12. With	in 1 year before you filed for bankru	uptcy, was any of your pro	perty in the possess	ion of an assigne	e for the benef	it of creditors, a

Official Form 107

■ No □ Yes

court-appointed receiver, a custodian, or another official?

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Case number (if known) Document Debtor 1 **Joyce Yvette Foy**

Par	t 5: List Certain Gifts and Contributions	i			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy,	did you give any gifts with a total value of more tl	nan \$600 per person	?
	Gifts with a total value of more than \$600 per person)	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	tcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	how the loss occurred	Include	ibe any insurance coverage for the loss ethe amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay on going a bankruptcy petition? Texts, or credit counseling agencies for services required		erty to anyone you
	□ No				
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Banyon & Scheinbaum, LLC 3077 West Jefferson Street Suite 107 Joliet, IL 60435		\$650 (Attorney Fee) + \$335 (Filing Fee) = \$985		\$985.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	itors o		or transfer any prope	erty to anyone who
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment

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Debtor 1 **Joyce Yvette Foy**

18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.						
	Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v			ibe any property or ents received or debts	Date transfer made	was
	Person's relationship to you			paid ii	n exchange		
19.	Within 10 years before you filed for bankrul beneficiary? (These are often called asset-pro		y property to a	self-settle	d trust or similar device	of which you are	e a
	■ No						
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the prop	erty trans	sferred	Date Transfer made	was
Par	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Sto	orage Unit	s		
20.	sold, moved, or transferred?						
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or	Date account was closed, sold, moved, or transferred	Last bal before closir trai	
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, an	y safe dep	oosit box or other depos	itory for securiti	ies,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit	or place other than your	home within 1	year befor	e you filed for bankrupt	cy?	
	■ No □ Yes. Fill in the details.						
		Who also has or h	had accoss	Doscribo	the contents	Do you still	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control	I for Someone Else					
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any propert	y you borr	rowed from, are storing	for, or hold in tru	ust
	■ No □ Yes. Fill in the details.						
	Owner's Name	Where is the prop	nerty?	Describe	the property		/alue
	Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)	State and ZIP	Describe	ше ргорену	V	raiue
Par	t 10: Give Details About Environmental Inf	ormation					
For	the purpose of Part 10, the following definiti	ions apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Case number (if known) Document

Debtor 1 Joyce Yvette Foy

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.								
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.								
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
		■ No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	re you been a party in any judicial or adm	inistrative proceeding under any envi	ironr	mental law? Include settlements	and orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Pai	rt 11	Give Details About Your Business or 0	Connections to Any Business						
27.	Wit	— hin 4 years before you filed for bankrupte	cv. did vou own a business or have an	ıv of	the following connections to an	v business?			
		☐ A sole proprietor or self-employed in		•		,			
		☐ A member of a limited liability comp			·				
		☐ A partner in a partnership			,				
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting	•						
		No. None of the above applies. Go to P							
	_	Yes. Check all that apply above and fill							
	- Bu	siness Name	Describe the nature of the business		Employer Identification numbe	r			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or ITIN.			
					Dates business existed				
28.		hin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement (to ar	nyone about your business? Incl	ude all financial			
		No							
		Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code) Date Issued								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 17-25402 Doc 1 Filed 08/24/17 Entered 08/24/17 18:56:40 Desc Main Page 42 of 53
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Debtor 1 Joyce Yvette Foy

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Joyce Yvette Foy	
Joyce Yvette Foy	Signature of Debtor 2
Signature of Debtor 1	
Date _August 24, 2017	Date
'	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
□ Yes	
Did you pay or agree to pa	ay someone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	2001				
	nation to identify your	case:				
Debtor 1	Joyce Yvette Foy First Name	Middle Name		Last Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIST	TRICT OF ILL	INOIS		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official For		n for Indiv	riduals	Filing Under C	hapter 7	7 12/15
				<u> </u>		
If you are an indiv	vidual filing under chap	oter 7, you must fil	l out this for	m if:		
creditors have	claims secured by yo	ur property, or				
You must file this	ver is earlier, unless th	ithin 30 days after	you file you	bankruptcy petition or by t use. You must also send co		
	ople are filing together d date the form.	in a joint case, bo	th are equal	y responsible for supplying	correct inform	nation. Both debtors must
	nd accurate as possib our name and case nun		needed, att	ach a separate sheet to this	form. On the t	top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims				
			0	Who a 11 area Oladera a Oladera di ba	. D (0)	Catal Farms 400D). Cill to the
information be		irt 1 of Schedule D	: Creditors v	Who Have Claims Secured by	y Property (Or	ficial Form 106D), fill in the
Identify the cre	ditor and the property the	nat is collateral	What do y secures a	ou intend to do with the pro debt?	perty that	Did you claim the property as exempt on Schedule C?
	ar Max Auto Finance	•		ler the property.		□ No
name:			_	the property and redeem it.		■ \/
Description of	2005 Subaru Lega	cy 80,000		the property and enter into a mation Agreement.		Yes
property	miles			the property and [explain]:		
securing debt:						
D 10 11 17						
	ur Unexpired Persona		in Schedule	G: Executory Contracts and	l Unexpired Le	eases (Official Form 106G), fill
in the information	n below. Do not list rea	l estate leases. Un	expired leas	es are leases that are still in oes not assume it. 11 U.S.C.	effect; the lea	ase period has not yet ended.
Describe your ur	nexpired personal prop	perty leases			Wi	Il the lease be assumed?
Lassaula					_	
Lessor's name: Description of lea	sed				Ц	No
Property:						Yes
Lessor's name:	and					No
Description of lea Property:	seu					Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debt	or 1	Joyce Yvette Foy	Case number (if known)
Desc Prop		of leased	☐ Yes
Lessor's name: Description of leased			□ No
Prop	erty:		☐ Yes
	or's na	me: of leased	□ No
Prop	•		☐ Yes
Lessor's name: Description of leased			□ No
Prop	•	or roused	☐ Yes
	or's na		□ No
Prop		of leased	☐ Yes
Part :	3: S	ign Below	
		lity of perjury, I declare that I have indicated nat is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
		yce Yvette Foy	x
		e Yvette Foy ture of Debtor 1	Signature of Debtor 2
	Date	August 24, 2017	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-25402 Doc 1 Filed 08/24/17 Entered 08/24/17 18:56:40 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	re Joyce Yvette Foy		Case No			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be pai	d to me, for services rer	ndered or to	
				650.00		
	Prior to the filing of this statement I have received	1	\$	650.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.					
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of the agreement.				w firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, stand c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on h 	atement of affairs and plan which itors and confirmation hearing, a reduce to market value; ex- tions as needed; preparation	h may be required; nd any adjourned he emption planning	earings thereof;	ling of	
6.	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any a		g service:			
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of a s bankruptcy proceeding.	ny agreement or arrangement for	r payment to me for	representation of the de	ebtor(s) in	
	August 24, 2017	/s/ Christina Ban	von			
_	Date	Christina Banyor	n			
		Signature of Attorna				
		Banyon & Scheir 3077 West Jeffer Suite 107				

Joliet, IL 60435

Name of law firm

cbanyon.law@gmail.com

United States Bankruptcy CourtNorthern District of Illinois

		Northern District of Infinois		
In re	Joyce Yvette Foy		Case No.	
		Debtor(s)	Chapter	7
	V	ERIFICATION OF CREDITOR MA	ATRIX	
		Number of 0	Creditors: _	29
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credito	ors is true and	correct to the best of my
Date:	August 24, 2017	/s/ Joyce Yvette Foy Joyce Yvette Foy Signature of Debtor		

Associate Pathologists 39784 Treasury Center Chicago, IL 60694

Blatt, Hasenmiller, Leibsker &Moore 10 South LaSalle - Suite 2200 Chicago, IL 60603

Capital One PO Box 6492 Carol Stream, IL 60197

Car Max Auto Finance PO Box 3174 Milwaukee, WI 53201

Care Credit /Synchrony Bank PO Box 960061 Orlando, FL 32896

Charles Miller 23862 Network Place Chicago, IL 60673

Com Ed PO Box 9037 Addison, TX 75001

Com Ed PO Box 6111 Carol Stream, IL 60197

Comcast PO Box 3002 Southeastern, PA 19398

Convergent Outsourcing 800 SW 39th Street PO Box 9004 Renton, WA 98057

Credit One Bank PO Box 60500 City of Industry, CA 91716 Credit One Bank PO Box 98873 Las Vegas, NV 89193

Du Page Medical Group 15921 Collections Center Drive Chicago, IL 60693

Du Page Valley Anes PO Box 3872 Carol Stream, IL 60132

Edward Health Ventures 26185 Network Place Chicago, IL 60673

Edward Hospital PO Box 4207 Carol Stream, IL 60197

First Premier Bank 3820 N. Louise Ave Sioux Falls, SD 57117

First Premier Bank PO Box 5529 Sioux Falls, SD 57117

Heartland Bank Visa 301 Madison Street, Suite 275 Joliet, IL 60435

Joliet Radiological 36910 Treaury Center Chicago, IL 60694

Merchants Credit Guide 223 West Jackson Suite 900 Chicago, IL 60606

Merrick Bank PO Box 660175 Dallas, TX 75266 Midland Credit Management 2365 Northside Drive - Suite 300 San Diego, CA 92108

Midwest Respiratory 10660 West 143rd, Suite B Orland Park, IL 60462

Nationwide Credit & Collection PO Box 3219 Hinsdale, IL 60522

Nicor Gas PO Box 5407 Carol Stream, IL 60197

Physicians Immediate Care PO Box 8799 Carol Stream, IL 60197

Presence Saint Joseph Medical Cente 32814 Collection Center Drive Chicago, IL 60693

Stellar Recovery PO Box 1119 Charlotte, NC 28201